

FINANCIAL AFFIDAVIT

CJA 23
(Rev. 5/98)

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE

IN UNITED STATES
IN THE CASE OF☒ MAGISTRATE ☐ DISTRICT ☐ APPEALS COURT or ☐ OTHER PANEL (Specify below)

USA

vs. TOMITA INVANG

FOR

AT

LOCATION NUMBER

PERSON REPRESENTED (Show your full name)

TOMITA INVANG

- 1 ☒ Defendant - Adult
 2 ☐ Defendant - Juvenile
 3 ☐ Appellant
 4 ☐ Probation Violator
 5 ☐ Parole Violator
 6 ☐ Habeas Petitioner
 7 ☐ 2255 Petitioner
 8 ☐ Material Witness
 9 ☐ Other (Specify)

DOCKET NUMBERS

Magistrate

District Court

07 CR 867

Court of Appeals

CHARGE/OFFENSE (describe if applicable & check box)

☒ Felony
☐ Misdemeanor

185 1029 (a)(5)

12-28-07

DEC 28 2007

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

ASSETS	EMPLOYMENT	Are you now employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Am Self Employed	United States District Court
		Name and address of employer:	
		IF YES, how much do you earn per month? \$	IF NO, give month and year of last employment 1/07 How much did you earn per month? \$ 3100
		If married is your Spouse employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		IF YES, how much does your Spouse earn per month? \$	If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$
OTHER INCOME	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY \$ THE SOURCES		
CASH	Have you any cash on hand or money in savings or checking account <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, state total amount \$ 0		
PROPERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	IF YES, GIVE THE VALUE AND DESCRIBE IT		
	VALUE	DESCRIPTION	
	\$4500	Lexus	

OBLIGATIONS & DEBTS	DEPENDENTS	MARITAL STATUS <input checked="" type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR DIVORCED	Total No. of Dependents 0	List persons you actually support and your relationship to them
	DEBTS & MONTHLY BILLS (LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)	APARTMENT OR HOME: Apt	Creditors	Total Debt Monthly Pay.
	Utilities		\$	\$ 625.00
	Auto		\$	\$ 30.00
	Other		\$	\$ 50.00
			\$	\$ 60.00

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date) 12/28/07

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)

TOMITA INVANG